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the shrunken cell. No segments were seen in this case, nor embryonic extracorpuseular bodies. There were large, bizarre, pigmented bodies, not vacuolated; pigment black and quiescent; polymorphonuclear leucocytes pigmented.

Case No. 2, of McDaniel's, thought by all to be suspicious, had no organisms.

No. 3 was a tertian type, large, poorly defined, actively ameboid organism, in full-sized cell.

No. 4 and No. 5 I believe to be tertian.

Urine, in numerous cases found to have been albuminoid by us, was again tested, and the chemist made a large number of these tests. In nearly all there was 30 to 40 per cent albumen. At 8 p. m. a general conference, all present, Dr. Oliphant stated that he had been able to find nothing to change his views of the situation; his experts had not yet finished and that no decision could be reached. Dr. Harralson thus decided. Dr. Saunders and myself then announced our intention of returning to Mobile, as we were convinced, and our duty was to report there. We were asked to delay. At this stage the resident physician hastily announced the imminent death from convulsions of Miss Shutze, the patient seen by Dr. Saunders and diagnosed yellow fever. This information was as a thunderclap to those who had announced it "dengue." Great pressure was exercised on Dr. Saunders and he determined to await the autopsy; Dr. Harralson and Dr. Oliphant specially requested this. A 6 a. m. Dr. Archinard made section of this body when all the conditions of the first autopsy were duplicated. At a conference at 9 a. m. each gentleman thus expressed his opinion. We returned to our respective cities.

I can inform you that during these trying hours of investigation and conference, as the representative of the Service, aiding Mobile, I was the recipient of much consideration from the hands of the officials of Louisiana and Mississippi, and it will always remain a pleasant experience, my contact with such active, earnest, honest, and intelligent health officials, in whom our entire country may feel a perfect confidence. Of Ocean Springs and the *causes* of the outbreak I will try to offer information more exact than that now available. Also, as to the dual infection of some of the cases.

Respectfully,

EUGENE WASDIN,
Passed Assistant Surgeon, U. S. M. H. S.

Yellow fever precautions in Florida.

[Sent to all agents, some forty-five, one in each county.]

EXECUTIVE OFFICE,
STATE BOARD OF HEALTH OF FLORIDA,
Jacksonville Fla., September 7, 1897.

DEAR DOCTOR: Your attention is called to the inclosed proclamation and to the rules and regulations of the State board of health bearing on interstate quarantine and medical inspection.

Official information has been received at this office of the existence of cases of yellow fever in the States of Louisiana and Mississippi (just how many it is not known), and it has been deemed advisable to institute the precautions contemplated in the rules to which attention is called.

For the present certificates will be demanded of all persons entering the State from the direction of the suspected localities. Persons recently

therefrom may be placed by you under observance or surveillance by forbidding them under penalty of arrest to leave their premises, or hold communication with anyone, until the incubative period of the disease has elapsed. On no account must you exercise the authority of quarantine against disease appearing outside of your county jurisdiction without the consent of the State health officer.

You will be apprised from time to time through the press and by mail of the attitude of the State board of health in relation to this matter, which at present presents no occasion for alarm nor demands other action than that here indicated.

Very truly, yours,

JOSEPH Y. PORTER,
State Health Officer.

[Inclosure No. 1.]

PROCLAMATION.

JACKSONVILLE, *September 7, 1897.*

Whereas, The State board of health of Florida has received official information of the existence of yellow fever in the States of Louisiana and Mississippi, it is hereby ordered that no persons or baggage from infected points in either of the States named shall be permitted to enter the State of Florida without a certificate, signed by the mayor, under the corporate seal, if the person is from a municipal corporation, and if not from a municipal corporation, then a certificate from a justice of the peace, that said person has not been exposed, either in person or baggage, to infection or contagion within fifteen days before the date of said certificate, and said certificate shall bear date not more than five days prior to such presentation.

Rules 92, 93, 94, 95, 96, 97, and 98 (Interstate quarantine and medical inspection) of the rules and regulations of the State board of health of Florida will be strictly enforced.

JOSEPH Y. PORTER,
State Health Officer of Florida.

[Inclosure No. 2.]

Burial, disinterment, and removal of human remains and carcasses of animals.

RULE 28. *Duty of authorities.*—It shall be the duty of the mayor and municipal authorities of incorporated cities and of the county commissioners of unincorporated towns and villages within this State to require proper burial or cremation of all persons deceased, within their jurisdiction, whether the same be residents or visitors, paupers, or otherwise.

RULE 29. *Exhumation and removals.*—No human remains shall be disinterred or removed from any place of interment in this State, or brought into or carried through this State for burial without the permission of the State board of health.

RULE 30. *Burial of bodies.*—Persons dying from diphtheria, scarlet fever, smallpox, Asiatic cholera, leprosy, typhus fever, yellow fever, or other infectious or contagious diseases shall be buried or cremated within six (6) hours from the time of death. Persons dying from all other diseases, except the foregoing, shall be interred or cremated within twenty-four (24) hours from the time of death during the quarantine season as specified in rule 65; and within forty-eight (48) hours at all other seasons of the year; unless properly embalmed, and if so embalmed no body shall be held for interment or transportation for a period longer than seven days from death.

RULE 31. *Time of exhumations.*—The disinterment of bodies for transportation to other points or for removal from one grave to another grave in the same cemetery, is forbidden during the quarantine season of any year, except by special permit from the State health officer.

RULE 32. *Disinterment and transportation forbidden in certain cases.*—The disinterment or transportation of the bodies of those having died from the diseases mentioned in rule 30 is absolutely prohibited, except by permission of the State board of health.

RULE 33. *Method of transportation.*—All bodies prepared for transportation must be placed in an air-tight zinc, tin, copper, or lead lined coffin, or in an air-tight casket, hermetically sealed (soldered), and all inclosed in a strong, tight, wooden box. A cer-

tificate from the attending physician setting forth the date and cause of death, and a certificate from the agent of the State board of health, or other State health authority, granting permission for the removal, and showing name of the deceased, age, place of death, cause of death, the point to which it is to be shipped, and the name of the medical attendant, must also in all cases accompany the casket containing the remains.

RULE 34. It shall be the duty of the mayor and municipal authorities of incorporated cities, and of the county commissioners of unincorporated towns and villages, in this State to require burial or cremation of the carcasses of dead cattle, horses, dogs, hogs, and other animals within twenty-four hours after decease.

STATE BOARD OF HEALTH, *Jacksonville, Fla.*

Smallpox in Birmingham.

The following daily telegrams from County Health Officer J. W. Barclay give the progress of smallpox:

September 9: Two cases from Camp Detention, colored; 1 colored from county; 1 white from county. September 11: No new cases in city or county to-day. September 12: No cases to-day. September 13: One case from Camp Detention; nothing in city or county. September 14: One new case in city, colored. September 15: Four cases in city, colored.

Leprosy in North Dakota.

BISMARCK, N. DAK., *September 4, 1897.*

SIR: I have the honor to report that at least 2 cases of leprosy are said to exist in Walsh County, in this State.

On August 28 last, I wrote to the superintendent of the State board of health asking him if the report was true, and if so to give me particulars of the cases, but so far I have received no reply. To-day the attorney-general of the State, who is ex-officio president of the board of health, informed me that the report was true and that one of the persons affected was a Swede who had not been long in this country and was now anxious to return to Sweden. Until I hear from the superintendent I can not tell what precautions the local authorities are taking to prevent the spread of the disease.

I inclose a newspaper clipping bearing on this subject.

Respectfully, yours,

F. R. SMYTH,
Acting Assistant Surgeon, U. S. M. H. S.

[Inclosure.]

From Bismarck letter, August 27, 1897.

NORTH DAKOTA NEWS.

Leprosy.—Dr. LeBarge, of Grafton, was called to visit a family living 12 miles west of Edinborg and found 2 cases of a disease which he pronounces leprosy. The patients are young men, one married and the other single. They are Scandinavians, and have been engaged in farming for some time. The disease is well developed, and Dr. LeBarge feels quite certain of its nature. The report received does not state what further steps have been taken, but the matter has undoubtedly been reported to the State board of health, and if the first diagnosis proves correct it will be necessary to isolate the patients.